

### **REMARKS**

The Office Action dated March 27, 2009 has been carefully reviewed and the Examiner's comments carefully considered. Claims 1-29 are pending in the present application, with claims 1 and 14 being in independent form. Claims 1 and 8 have been amended to correct grammatical errors, accordingly no new matter has been added.

Claims 1, 6, 9, 10, 12-13, and 28 stand rejected under 35 U.S.C. §103(a) for obviousness based upon non-patent literature "Hold the Lab in the Palm of Your Hand: Point-of-Care Blood Analyzers Speed Test Results at the Patient's Bedside" by McConnell (hereinafter "the McConnell publication") in view of United States Patent No. 5,897,493 to Brown (hereinafter "the Brown patent").

Claim 1 recites, in relevant part, "receiving by a central device sample data from at least one sample testing device at a patient point of care location ... said central device adapted to maintain at least one database". Claim 1 also recites, in relevant part, "updating said database by the central device ... and providing said database to a network server." Accordingly, as defined by claim 1, data is received from a monitoring device by a central device which stores it in an internal database where it can be updated and then sent from a central device to a network server.

The Examiner contends that Figs. 1, 2, and 9 of the Brown patent disclose a method of collecting and testing data from a plurality of patent point of care locations, and updating the database by a central device, as described in column 9 lines 66-67 and column 10, lines 1-7 of the Brown patent. The Brown patent discloses a monitoring system for querying a patient and measuring physiological conditions of the patient and generating a script in response thereto. The Brown patent describes a simple monitoring system, comprising a remote apparatus and a network server. The Brown patent monitoring system only passes patient information to the network server (*see* the Brown patent, column 5, lines 15-19), and does not disclose or suggest the intermediary steps, namely, passing the information to a central device and then from the central device to the network server as recited in independent claim 1. Independent claim 1 specifically recites the features in the steps of "receiving by a central device sample data" and "updating said database by the central device ...and providing said database to a network

server.” The Brown patent does not disclose or suggest these process steps. The benefit of the steps of “receiving by a central device sample data” and “updating said database by the central device ...and providing said database to a network server” of the presently claimed invention is that the data that resides in the central device database can be manipulated quickly and efficiently, thereby allowing point of care physicians to perform their testing, pass the information to the central device database, and then further complete the information record in the database.

This intermediate step of receiving by a central device sample data, updating said database by the central device, and providing said database to a network server allows testing to be performed on one device which is not removed from a contaminated area, while still allowing the practitioner to further update and process the information before submitting the database to the network server. After the database is sent to the network server, data is normally less accessible because of external parameters. Accordingly, the Brown patent does not disclose or suggest this intermediate step.

Furthermore, independent claim 1 recites, in relevant part, “tagging said received sample data with patient identifier label information, said patient identifier label information communicated to said central device via a data input device”. The Brown patent does not disclose a data input device. The Examiner has cited the McConnell publication as describing a device providing barcode scanning to save time (*see* the McConnell publication, page 58, bullet 4). The McConnell publication describes a point-of-care blood analyzer having a self-contained sample cartridge. The Abbott Diagnostics advertisement on pages 58-59 of the McConnell publication presents features of a particular point-of-care monitor. Page 58 lists “Laser bar-code scanning for all data entry”. Page 59 lists “Automatic data downloading via Precision NET to the LIS/HIS when PCx is placed in docking station – no staff intervention required”, “Bi-directional communication between Precision meters, laboratory, and nursing PC”, and “No cleaning required – maximized infection control”.

Applicants respectfully submit that the provision of barcode scanning of the McConnell publication is not equivalent to the tagging received sample data with a patient identifier label information which is communicated to the central device by a data input device of claim 1. The presently claimed invention provides a database entry on the central device that

can be updated using a data input device (*see* [0039]-[0044] of the present application). In order to facilitate this, sample data is sent from the sample testing device including a patient identifier (*see* [0042] of the present application). The patient identifier can be used to match sample data with patient identifier label information. The data input device can read and transmit patient identifier label information which the central device can match with the sample data based on the patient identifier included in both. Therefore, the “tagging” recited in claim 1 of the present invention is the matching of patient identifier label information with its respective sample data. The McConnell publication fails to disclose or suggest this “tagging” and does not even disclose separating the collection of sample data from the patient identifier label information.

Accordingly, Applicants respectfully submit that neither the Brown patent, nor the McConnell publication, nor the combination of the Brown patent and the McConnell publication disclose or suggest the present invention recited in independent claim 1. Applicants assert that neither the Brown patent nor the McConnell publication disclose or suggest the steps of “receiving by a central device sample data” and “updating said database by the central device ...and providing said database to a network server.” Applicants further assert that neither the Brown patent nor the McConnell publication disclose or suggest “tagging said received sample data with patient identifier label information, the patient identifier label information communicated to said central device via a data input device.” Although the system of the McConnell publication includes a device that reads bar codes, it does not teach utilizing the bar code reader independently of the testing function as recited in independent claim 1.

For the foregoing reasons, independent claim 1 is patentable over the Brown patent, the McConnell publication, and the combination of the Brown patent and the McConnell publication. Reconsideration of the rejection of independent claim 1 is respectfully requested.

With specific reference to the Examiner’s rejection of claim 6, in addition to the reasons discussed hereinabove in connection with independent claim 1, neither the Brown patent nor the McConnell publication disclose or suggest controlling a central device to communicate data to a patient identifier information label as at least one data packet communicated from said central device via a second wireless communication module, as recited in claim 6. Applicants have studied all of the applied references and find that none of the applied references discuss

communicating data to a label as required by the claimed language of claim 6. Accordingly, for these reasons, reconsideration of the rejection of claim 6 is respectfully requested.

With specific reference to the Examiner's rejection of claim 9, in addition to the reasons discussed hereinabove in connection with independent claim 1, neither the Brown patent nor the McConnell publication disclose or suggest a data input device incorporated with the sample testing device. Reconsideration of the rejection of claim 9 is respectfully requested.

With specific reference to the Examiner's rejection of claim 10, in addition to the reasons discussed hereinabove in connection with independent claim 1, neither the Brown patent nor the McConnell publication disclose or suggest a data input device that is incorporated with said central device. Accordingly, for these reasons, reconsideration of the rejection of claim 10 is respectfully requested.

With specific reference to the Examiner's rejection of claim 12, in addition to the reasons discussed hereinabove in connection with independent claim 1, neither the Brown patent nor the McConnell publication disclose or suggest a testing device that comprises at least one of a hand-held analytical device and stand-alone computer workstation, said testing device located within a contamination field about a patient at a patient point of care location. The McConnell publication does not disclose locating within a contamination field. In the McConnell publication, the testing device is a roaming device, and the McConnell publication teaches using the device throughout a variety of places, including the operating room, emergency department, ambulances, and helicopters (*see* the McConnell publication, page 57). However, the McConnell publication fails to disclose or suggest locating the testing device within a contamination field as defined in the present application, meaning it stays only within such an area. Accordingly, for these reasons, reconsideration of the rejection of claim 12 is respectfully requested.

With specific reference to the Examiner's rejection of claim 13, in addition to the reasons discussed hereinabove in connection with independent claim 1 and dependent claim 12, neither the Brown patent nor the McConnell publication disclose or suggest a central device that comprises at least one of a hand-held analytical device and stand-alone computer workstation, said central device located beyond a contamination field about a patient at a patient point of care location. In addition to the arguments hereinabove with reference to claim 12, neither the Brown patent nor the McConnell publication disclose or suggest delineating a contamination field from

a non-contaminated area to promote safety. Accordingly, it would not be obvious to separate the system between contamination and non-contamination areas, as required by claim 13 of the present invention. Accordingly, for these reasons, reconsideration of the rejection of claim 13 is respectfully requested.

With specific reference to the Examiner's rejection of claim 28, in addition to the reasons discussed hereinabove in connection with independent claim 1, neither the Brown patent nor the McConnell publication disclose or suggest a testing device comprising at least one of a hand-held analytical device and stand-alone computer workstation, said testing device located within a contamination field about a patient at a patient point of care location, wherein said central device comprises at least one of a hand-held analytical device and stand-alone computer workstation, said central device located beyond the contamination field about the patient. The McConnell publication does not disclose two devices communicating between each other. Accordingly, for these reasons, reconsideration of the rejection of claim 28 is respectfully requested.

Claims 2-5 stand rejected under 35 U.S.C. §103(a) for obviousness based upon the Brown patent in view of the McConnell publication and further in view of United States Patent Application Publication No. 2001/0051766 to Gazdzinski (hereinafter "the Gazdzinski publication").

The Gazdzinski publication describes an endoscopic device which is introduced into the intestinal tract of a living organism and which operates autonomously therein, adapted to obtain and store or transmit one or more types of data such as visual image data, laser autofluorescence data, or ultrasonic waveform data. The Gazdzinski publication describes using Bluetooth and other so-called "3G" (third generation) communications technologies. The Bluetooth wireless technology allows users to monitor using a single "master" device adapted to receive and store/display the streamed data received from the various patients.

Claims 2-5 depend directly or indirectly from and add further limitations to independent claim 1. Applicants respectfully submit that the Gazdzinski publication fails to rectify the deficiencies of the Brown patent and the McConnell publication. Specifically, Applicants respectfully submit that the Gazdzinski publication fails to disclose or suggest the steps of "receiving by a central device sample data" and "updating said database by the central

device ...and providing said database to a network server”, as recited by independent claim 1. Applicants further submit that the Gazdzinski publication fails to disclose or suggest “tagging said received sample data with patient identifier label information, said patient identifier label information communicated to said central device via a data input device”, as recited by independent claim 1. For the foregoing reasons, dependent claims 2-5 are patentable over the Brown patent, the McConnell publication, the Gazdzinski publication, and the combination of the Brown patent, the McConnell publication, and the Gazdzinski publication. Reconsideration of the rejection of dependent claims 2-5 is respectfully requested.

Claims 7-8, 14-15, 20-24, 26-27, and 29 stand rejected under 35 U.S.C. §103(a) for obviousness based upon the Brown patent in view of the McConnell publication and further in view of United States Patent Application Publication No. 2003/0140928 to Bui et al. (hereinafter “the Bui publication”).

Dependent claims 7-8 depend directly or indirectly from and add further limitations to independent claim 1. Applicants respectfully submit that the Bui publication fails to rectify the deficiencies of the Brown patent and the McConnell publication. Specifically, Applicants respectfully submit that the Bui publication fails to disclose or suggest the steps of “receiving by a central device sample data” and “updating said database by the central device ...and providing said database to a network server”, as recited by independent claim 1. Applicants further submit that the Bui publication fails to disclose or suggest “tagging said received sample data with patient identifier label information, said patient identifier label information communicated to said central device via a data input device”, as recited by independent claim 1. For the foregoing reasons, dependent claims 7-8 are patentable over the Brown patent, the McConnell publication, the Bui publication, and the combination of the Brown patent, the McConnell publication, and the Bui publication. Reconsideration and withdrawal of the rejection of dependent claims 7-8 is respectfully requested.

Independent claim 14 recites, in relevant part, “a central device, adapted to receive sample data from said sample testing device at a patient point of care location, said central device being further adapted to maintain at least one database and to update said database based upon at least one of said cartridge identifier information, patient identifier information, and received sample data, and to provide said database to a network server” (emphasis added). As

discussed above with reference to independent claim 1, the Brown patent and the McConnell publication, taken alone or in combination, fail to disclose or suggest that the central device is adapted to receive sample data from the sample testing device, update the database, and provide the database to a network server. As discussed above, the claimed central device allows testing to be performed on one device which is not removed from a contaminated area, while still allowing the practitioner to further update and process the information before submitting the database to the network server.

Applicants further respectfully submit that the Bui publication fails to rectify the deficiencies of the Brown patent and the McConnell publication. The Bui publication describes a patient care system having personnel, equipment, and medication identifiers. The information included in the identifiers may be a format such as a bar code, a radio frequency (RF) device, or a readable format such as an RFID. The Bui publication does not disclose or suggest a central device that is adapted to receive sample data from the sample testing device, update the database, and provide the database to a network server. Accordingly, Applicants submit that the Bui publication fails to rectify the deficiencies of the Brown patent and the McConnell publication. For the foregoing reasons, independent claim 14 is patentable over the Brown patent, the McConnell publication, the Bui publication, and the combination of references. Reconsideration and withdrawal of the rejection of independent claim 14 is respectfully requested.

Dependent claims 15, 20-24, 26-27, and 29 depend directly from independent claim 14 and are believed patentable for the reasons stated herein. Reconsideration of the rejection of dependent claims 15, 20-24, 26-27, and 29 is respectfully requested.

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**CONCLUSION**

Based on the foregoing amendments and remarks, reconsideration of the rejections and allowance of pending claims 1-29 are respectfully requested. Should the Examiner have any questions regarding any of this information, the Examiner is invited to contact Applicants' undersigned representative by telephone at (412) 471-8815.

Respectfully submitted,

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